OMB Number: 2040-0194 **Approval Expires:** 07/31/01

Information Collection Underground Injection Control (UIC) Class V Well Study Spent Brine Return Flow Wells

U.S. Environmental Protection Agency Washington, DC 20460

NOTE: If there is a more appropriate person to complete this questionnaire, please forward it.

Please provide missing information and/or update the contact information provided below.

	Contact
State:	
Name of Contact:	
Name of Agency:	
Street Address:	
City, State Zip:	
Phone Number:	
E-mail Address:	

If you have any questions or need assistance filling out this questionnaire, please contact:

Class V Coordinator (703) 931-8700 EPA is required to collect this information as part of its consent decree with the Sierra Club, which was amended in 1997. EPA is authorized to collect this information under § 1421 of the SDWA, 42 USC §300h. Responses to this collection are voluntary. The public reporting and recordkeeping burden for this collection of information is estimated to average 2 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, OPPE Regulatory Information Division • U.S. Environmental Protection Agency (2137) • 401 M St., S.W. • Washington, D.C. 20460 • ; and to the Office of Information and Regulatory Affairs, Office of Management and Budget • 725 17th Street, N.W. • Washington, D.C. 20503 • Attention: Desk Officer for EPA. • Include the EPA ICR number and OMB control number in any correspondence. Do not send the completed form to this address.

Information Collection on Spent Brine Return Flow Wells

DEFINITION: Spent brine return flow wells are used to dispose of the spent brine which result from the extraction of minerals, halogens and other compounds from fluids. These wells are commonly associated with manufacturing facilities that produce specialty chemicals such as boron, bromine, magnesia, or their derivatives.

We are only asking you to submit data that has already been collected by the State and is readily available. Please answer the following questions to the extent possible based on existing data.

flow v	re obtaining regulations from the State Underground Injection Control (UIC) program. If spent brine return wells are regulated under a separate statute or regulation, please provide the citation(s) or attach appropriate s. 9 Check if attached.
Numl	ber of Spent Brine Return Flow Wells
2a.	Indicate the number of spent brine return flow wells that can be documented in the State (excluding wells that have been permanently plugged and abandoned):
2b.	In your judgement, does the number given in 2a accurately reflect the number of wells in the State? 9 Yes
2c.	Please estimate the number of wells in the State (excluding wells that have been permanently plugged and abandoned):
2d.	What is the source of the estimate given in 2c (e.g., survey, model, best professional judgement)?

3. Location of Spent Brine Return Flow Wells

Please provide the location of each spent brine return flow well in your inventory. We prefer latitude and longitude coordinates (a). If that information is not available, please provide other location information such as zip code (b), county (c), Quarter/Section/Township/Range (Q/S/T/R) coordinates, or other identifying information (d). If you have a database containing this information, you may submit this information in any format that is convenient for you instead of completing the following table. If completing the table or submitting information will be extremely time consuming or financially burdensome, please contact the Class V coordinator (see cover page). Please copy this page if you need additional lines.

One well per line please.

Unique well identifier (e.g., permit no., operator name)	PLEASE COMPLETE (a), (b), (c), OR (d). WE PREFER (a).					
	(a) Latitude/ Longitude (to minutes)		(b) Zip Code	(c) County Name	(d) Other Location Information (e.g.,Q/S/T/R, UTM)	
	Latitude	Longitude	1			

4.	Does the State regulate spent brine return flow wells as Class II or Class III wells, or place Class II or III
	requirements on them?

Does the State:	Yes	No
Regulate Spent Brine Return Flow Wells as Class II or III Wells		
Place Class II or III Requirements on Spent Brine Return Flow Wells		

Does th	ne Stat	e have construction and/or siting requirements for these wells?
9 Yes	ÿ	Please describe briefly below, or attach appropriate information. 9 Check if information attached
9 No	ÿ	Go to Question 7.
Does th	ne Stat	e conduct inspections or review records to ensure that applicable construction requirements are me
9 Yes 9 No	ÿ	Please describe briefly below.

Does the State have operating requirements (e.g., contaminant limits, monitoring requirements)? Please note that MITs are addressed in Questions 9 through 11.				
9 Yes 9 No	_	Please describe briefly below, or attach appropriate information. 9 Check if information attached Go to Question 9.		
Does th	ne Stat	e conduct inspections or review records to ensure that applicable operating requirements are met?		
9 Yes 9 No	У	Please describe briefly below.		
Does the	ne Stat	e require operators to conduct mechanical integrity tests (MITs)?		
Does th	ne Stat	e require operators to conduct mechanical integrity tests (MITs)?		
		e require operators to conduct mechanical integrity tests (MITs)? Go to Question 12.		
9 Yes 9 No	ÿ			
9 Yes 9 No	ÿ u prov	Go to Question 12.		
9 Yes9 NoCan yo9 Yes9 No	ÿ u prov ÿ	Go to Question 12. ide data on MIT failure rates in your state?		
9 Yes 9 No Can yo 9 Yes 9 No When a	ÿ u prov ÿ are MI'	Go to Question 12. ide data on MIT failure rates in your state? Please attach such information. 9 Check if attached.		

9 Yes 9 No	ÿ	From whom are these studies available?
Do you the State		any studies on injectate quality for similar wells that are regulated under the Class II or III programs
9 Yes 9 No	ÿ	From whom are these studies available?
Have th	nere be	en any incidents in your State in which a spent brine return flow well contributed to contamination
an Und	ergrou	·
an Und	ergroung water	en any incidents in your State in which a spent brine return flow well contributed to contamination and Source of Drinking Water (USDW)? Contamination can include exceedances of Federal or State restandards, ground water standards, or health advisory levels. If any study or description of the incident exists, please provide us a copy. If not, please provide brief summary for each incident. To the extent this information is available, include a description what happened, the impact on ground water quality or drinking water wells (public or private), the date of the incident, the name of the city or county in which the incident occurred, and the name phone number of a contact for follow up. 9 Check if description(s) attached.
an Unddrinking	ergroung water	If any study or description of the incident exists, please provide us a copy. If not, please provide brief summary for each incident. To the extent this information is available, include a description what happened, the impact on ground water quality or drinking water wells (public or private), the date of the incident, the name of the city or county in which the incident occurred, and the name
an Under drinking	ergroung water	If any study or description of the incident exists, please provide us a copy. If not, please provide brief summary for each incident. To the extent this information is available, include a description what happened, the impact on ground water quality or drinking water wells (public or private), the date of the incident, the name of the city or county in which the incident occurred, and the name phone number of a contact for follow up. 9 Check if description(s) attached.

Additional Contacts

Please list individuals that could help answer our questions on spent brine return flow wells. Include individuals from other State programs, local programs, or institutions such as universities, as appropriate.

Name/Title:	Name/Title:
Affiliation:	Affiliation:
Street Address:	Street Address:
Telephone Number:	Telephone Number:

Thank you for your assistance.

Please remember to:

- C Attach appropriate information.
- C Return this questionnaire
 In the pre-paid Federal Express envelope to:
 Class V Study Coordinator
 4900 Seminary Road
 Suite 600
 Alexandria, VA 22311

By fax to: Class V Study Coordinator (703) 931-8701